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APPLICANTS

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**** CONTINUING DATA *******

This application is a DIV of 09/407,519 09/28/1999 PAT 6,294,108 *
 which is a DIV of 09/022,798 02/13/1998 PAT 6,077,495
 which is a CIP of 08/961,488 10/30/1997 PAT 5,974,810
 which is a CIP of 08/891,665 07/11/1997 ABN
 which is a CIP of 08/808,768 03/03/1997 ABN
 (*)Data provided by applicant is not consistent with PTO records.

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 07/11/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 0	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

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TITLE

METHOD AND SYSTEM FOR THE CONTROLLED RELEASE OF CHLORINE DIOXIDE GAS

FILING FEE RECEIVED 836	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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